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Bib Data Sheet

CONFIRMATION NO. 1934

SERIAL NUMBER 10/007,140	FILING DATE 11/05/2001 RULE	CLASS 435 436	GROUP ART UNIT 1645 1743	ATTORNEY DOCKET NO. A01317
APPLICANTS Lyn Hughes, Harleysville, PA;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/04/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY PA	SHEETS DRAWING 2	TOTAL CLAIMS 3
Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 1		
ADDRESS 21898				
TITLE Buccal dissolution of active substances				
FILING FEE RECEIVED 870	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____	